



The Gambia Pneumococcal Vaccine Trial

THE HUMAN FACE OF PNEUMOCOCCAL DISEASE IN AFRICA



Fatima

Eustin

Fatima is the second youngest of five children. Her grandmother looks after Fatima and her siblings and tends crops at the family homestead in Kilifi, Southern Kenya. Fatima's mother works as a casual laborer in nearby Mombasa, sending money back to her large family when she can.

In September 2004, Fatima became very ill. She had a fever, was coughing constantly and refused to eat. Her grandmother had already tried traditional remedies, but found that in this case they weren't effective. She then took Fatima to the nearest private health clinic where the child was given oral and intravenous drugs. But her condition worsened over the week and Fatima's grandmother took the little girl to hospital where she was immediately admitted with pneumococcal pneumonia.

At the same time, Eustin, a 13-month-old girl from the same district arrived with a fever, an extremely hot body and a visible rash. She could not move her arms or legs; her mother worried that Eustin would never walk again. The diagnosis was pneumococcal meningitis. Eustin stayed in the hospital for 14 days and received life-saving treatment.

While the children were in the hospital, Fatima's grandmother and Eustin's mother were glued to their bedsides—not only to comfort the children, but to feed, clean and care for the young girls. Because nurses are in short supply, caregivers—usually mothers—must stay with a sick child in the hospital. Sick with fear over the thought that her granddaughter might die, Fatima's grandmother couldn't sleep or eat. Fatima's breathing sounded “like a bush baby.” For the first two days she could not catch her breath enough to be able to eat. But after one week at Kilifi District Hospital that included a series of intravenous medicines, pills and fluids, Fatima's condition improved.

Fatima's illness hit her grandmother's finances hard. Fatima's hospital stay and medicine cost more than the price of two weeks' worth of food for the family. And while her grandmother cared for Fatima in the hospital she had to rely on relatives to take care of her other grandchildren. Crucial farm work—the family's source of income—went undone for two weeks.

Eustin also got better. Under the circumstances she was extremely lucky, given that many other children suffer long-term disability and hardship following a case of meningitis. In places like Kenya, disabled children—and later adults—are denied many things that healthy children have. They may never have access to an education or a productive job and will likely be dependent on their family members and community for their survival. In short, the effects of pneumococcal disease may last a lifetime and be felt by all the members of a family or community.